· .								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 10/698 720												-000
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER	THAN
TOTAL CLAIMS			20					RATE FEE		7	RATE	FEE
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC FEE 385.00		OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			_3 / minus 20=		. 6			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				inus 3 =	0	0		X43=		OR	X86=	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT				+145=		 	1	+290=	
• #	the difference	in column 1 is	less than zero, enter "0" in column 2				ᆫ	OTAL	38.00	OR	TOTAL	
	7-9-05CLAIMS AS AMENDED - PART II								اللكاتل)	ייעצ	OTHER	TUAN
2	, 9 D) ·	(Column 1)		(Column 2) (Column 3			SMALL ENTITY		OR	SMALL		
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	* 2	,6	=	,	(\$ 9=		OR	X\$18=	
AME	Independent	. 3	Minus			5/	X43=		1/	OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ι.	145=		OR	+290=	
											TOTAL	
		ADE	OIT. FEE	<u> </u>	,	ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA	ŀ	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 20	Minus	•	20	=	×	\$9=		OR	X\$18=	
	Independent	<u>ک</u> ٠	Minus			=	×	(43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		OR	+290≐	
								TOTAL			TOTAL	
	(Column 1) (Column 2) (Column 3)								<u> </u>	,	ADDIT. FEE	
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO	ST JER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RÀTE	ADDI- TIONAL
	Total	•	Minus	,**	<u> </u>	=	X	\$ 9=	, rec	00	X\$18=	FEE
	Independent	•	Minus	***		=	-	43=		OR	X86=	
٢	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						⊢ _	→ =	 	OR	^00=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE OR ADDIT. FEE												
		ber Previously Paid					found in	n the ap	propriate box	in coh	ema 1.	

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